

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		73189.91
(b) Cash on Hand at Beginning of Reporting Period.....	90979.15	
(c) Total Receipts (from Line 19)	4007.80	88507.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	94986.95	161697.28
7. Total Disbursements (from Line 31).....	45488.21	112198.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	49498.74	49498.74
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3728.16	74449.82
(ii) Unitemized	0.00	4242.64
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3728.16	78692.46
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3728.16	78692.46
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	279.64	2969.41
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	6800.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	45.50
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4007.80	88507.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4007.80	88507.37

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	288.21	2998.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	288.21	2998.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45200.00	109200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	45488.21	112198.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45488.21	112198.54

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3728.16	78692.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3728.16	78692.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	288.21	2998.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	279.64	2969.41
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8.57	29.13

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Anderson, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Staff Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5922
 Amount of Each Receipt this Period 25.00
 Memo Item
 \$25 Bi-weekly payroll deduction

B. Bermingham, Maya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Gov. Affairs & Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5923
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

C. Bernstein, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Senior Director Research - IT Ops
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5924
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$10 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	227.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Braunstein, Ned, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Regulatory Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5925
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

B. Carver, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP- Clinical Scale Mfg. & Sciences
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5926
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

C. Chen, Gang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Protein Expression Sciences
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5927
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$50 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	338.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Daly, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Director - Oncology & Angiogenesis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5928
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

B. Daly, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Preclin. Devt & Protein Chem
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5929
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

C. Fairhurst, Jeanette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Assoc. Director Therapeutic Antibodies
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5930
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$50 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	338.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Fenimore, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Deputy Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5931
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

B. Geba, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Development Strategy & Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 807.66

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5932
 Amount of Each Receipt this Period 38.46
 Memo Item
 \$38.46 Bi-weekly payroll deduction

C. Gilooly, Patrice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - QA & Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5933
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	230.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Goss, Cynthia, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Director, Patient Advocacy
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

Transaction ID : SA11AI.5934

Amount of Each Receipt this Period
100.00

Memo Item
\$100 Bi-weekly payroll deduction

B. Kaplan, Michael, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Senior Director, Engineering
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

Transaction ID : SA11AI.5935

Amount of Each Receipt this Period
15.00

Memo Item
\$15 Bi-weekly payroll deduction

C. Korja, Nisha, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Associate Director, Public Policy
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

Transaction ID : SA11AI.5936

Amount of Each Receipt this Period
20.00

Memo Item
\$20 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. LaFond, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Senior Director-Scale Up & Developmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5937
 Amount of Each Receipt this Period 25.00
 Memo Item
 \$25 Bi-weekly payroll deduction

B. LaRosa, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - General Counsel & Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5938
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$192.30 Bi-weekly payroll deduction

C. Lebel, Delman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Assoc. Dir. State Affairs & State Pol.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5939
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$50 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	267.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Levine, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5940
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$50 Bi-weekly payroll deduction

B. Loosen, Erin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Assoc. Dir. Gov't Affairs & Public Pol
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5941
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$10 Bi-weekly payroll deduction

C. Markowitz, Jay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Senior Vice President - Portfolio Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5942
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	252.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Mellis, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Clinical Sciences Trans. Medicine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5943
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$192.30 Bi-weekly payroll deduction

B. Mirza, Hala, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Corporate Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5944
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$192.30 Bi-weekly payroll deduction

C. Murphy, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Research Regeneron Labs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5945
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$192.30 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	576.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Olson, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Research & Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5946
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$192.30 Bi-weekly payroll deduction

B. Paull, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Vice President - Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5947
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

C. Rideman, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Director - Medical Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5948
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$10 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	394.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Ruddy, Marcella, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Early Clinical Devt & Experimenta
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5949
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

B. Smeland, Tor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Exec. Dir. - Assistant General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3461.40

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5950
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$192.30 Bi-weekly payroll deduction

C. Soo, Yuhwen, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP Biostatistics and Data Mgmt, Clinic
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5951
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	576.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Thurston, Olin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Oncology & Angiogenesis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5952
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$100 Bi-weekly payroll deduction

B. Vitti, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP Clinical Sciences - Ophthalmology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5953
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

C. Volpe, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Vice President - Tax
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 12 / 2018
Transaction ID : SA11AI.5954
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	292.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zambrowicz, Brian, , ,

Mailing Address **777 Old Saw Mill River Road**

City **Tarrytown** State **NY** Zip Code **10591**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **Regeneron Pharmaceuticals Inc.** Occupation (for Individual) **VP - Functional Genomics and Chief VC**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2100.00**

Date of Receipt
10 / 12 / 2018

Transaction ID : SA11AI.5955

Amount of Each Receipt this Period
100.00

Memo Item
\$100 Bi-weekly payroll deduction

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	3728.16

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Regeneron Pharmaceuticals, Inc.

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2969.41

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2018

Transaction ID : SA15.5981

Amount of Each Receipt this Period
 279.64

Memo Item
 Reimbursement of Expenses - Bank Fees

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	279.64
TOTAL This Period (last page this line number only).....▶	279.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

Full Name (Last, First, Middle Initial) A. BOB CASEY FOR SENATE INC		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address PO BOX 58746		FEC Identification Number C C00431056 Transaction ID : SB23.5962
City PHILADELPHIA	State PA	Zip Code 19102
Purpose of Disbursement Political Contribution		Category/Type 011
Candidate Name CASEY, ROBERT P JR, , ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 00	

Full Name (Last, First, Middle Initial) B. BRADY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address PO BOX 8277		FEC Identification Number C C00311043 Transaction ID : SB23.5961
City THE WOODLANDS	State TX	Zip Code 77387
Purpose of Disbursement Political Contribution		Category/Type 011
Candidate Name BRADY, KEVIN, , ,		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TX	District: 08	

Full Name (Last, First, Middle Initial) C. CLARKE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018
Mailing Address 111-36 200TH. STREET		FEC Identification Number C C00415331 Transaction ID : SB23.5974
City HOLLIS	State NY	Zip Code 11412
Purpose of Disbursement Political Contribution		Category/Type 011
Candidate Name CLARKE, YVETTE, , ,		Amount of Each Disbursement this Period 3500.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 09	

SUBTOTAL of Disbursements This Page (optional)..... ▶

8000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

Full Name (Last, First, Middle Initial)

A. COMMITTEE FOR LEADERSHIP AND PROGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	05	/	2018

Mailing Address PO BOX 31107

FEC Identification Number

C C00366666

Transaction ID : SB23.5968

Amount of Each Disbursement this Period

5000.00

Memo Item

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. EXCELSIOR PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	05	/	2018

Mailing Address 824 S MILLEDGE AVE STE 101

FEC Identification Number

C C00541078

Transaction ID : SB23.5971

Amount of Each Disbursement this Period

5000.00

Memo Item

City ATHENS State GA Zip Code 30605

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SUSAN BROOKS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	03	/	2018

Mailing Address 9425 N MERIDIAN ST # 237

FEC Identification Number

C C00500207

Transaction ID : SB23.5966

Amount of Each Disbursement this Period

3500.00

Memo Item

City INDIANAPOLIS State IN Zip Code 46260

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
BROOKS, SUSAN MRS., , ,

Office Sought: House Senate President
State: IN District: 05

Disbursement For: 2018 Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

13500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. GUTHRIE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 9639

City BOWLING GREEN State KY Zip Code 42102

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
GUTHRIE, S. BRETT HON., , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: KY District: 02

Date of Disbursement

/ /

FEC Identification Number

C C00445023

Transaction ID : SB23.5973

Amount of Each Disbursement this Period

Memo Item

B. IMPACT

Full Name (Last, First, Middle Initial)

Mailing Address 192 LEXINGTON AVE.
SUITE 1001

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00348607

Transaction ID : SB23.5967

Amount of Each Disbursement this Period

Memo Item

C. NITA LOWEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 271

City White Plains State NY Zip Code 10605

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
LOWEY, NITA M, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NY District: 17

Date of Disbursement

/ /

FEC Identification Number

C C00219881

Transaction ID : SB23.5969

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. PALLONE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
PALLONE, FRANK JR, , ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District: 06

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00226928

Transaction ID : SB23.5956

Amount of Each Disbursement this Period

2100.00

Memo Item

B. PASCRELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address POB 100

City TEANECK State NJ Zip Code 07666

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
PASCRELL, WILLIAM J. HON., , ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District: 09

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2018

FEC Identification Number

C C00313510

Transaction ID : SB23.5978

Amount of Each Disbursement this Period

2000.00

Memo Item

C. SCALISE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 23219

City JEFFERSON State LA Zip Code 70183

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
SCALISE, STEVE MR, , ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: LA District: 01

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00394957

Transaction ID : SB23.5957

Amount of Each Disbursement this Period

2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

6100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. WALDEN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1091

City HOOD RIVER State OR Zip Code 97031

Purpose of Disbursement Political Contribution

Candidate Name WALDEN, GREGORY P. MR., , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: OR District: 02

Date of Disbursement: 10 / 05 / 2018

FEC Identification Number: C00333427
Transaction ID : SB23.5970
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Category/Type:

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Category/Type:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	45200.00